place the ordinance has been introduced in the Rajya Sabha on 26-11-1992.

Distribution of Primaquin to check the spread of Malaria in Delhi

1416. SHRI AJIT P. K. IOGI :
SHRT N. E. BALARAM :
SHRI CHATURANAN MISHRA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government's attention has been drawn to the news-item published in *the* "Times of India" dated 30th October, 1992 under the heading "MCD's malaria pill can be deadly";

(b) if so, whether it is a fact that the intake of Primaquin which is freely distributed by the Municipal Corporation of Delhi in some residential areas of Delhi has caused adverse reaction; and

(c) if so, the steps taken to stop indiscriminate distribution of this drug ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) Yes, Sir.

(b) It is understood from the Municipal Corporation of Delhi that as a special case Primaquin was distributed in scheduled doses in limited number of population in Vasant Kunj. However, no adverse reaction is reported to have been caused by the distribution of the drug.

(c) There is no indiscriminate distribution of this drag—it is being distributed only in a limited number of population.

Legislation to Regulate Refraction Spectacle Dispensing and Contact Lens Fitting etc.

1417. DR. SANJAYA SINH : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government propose to: bring forward a legislation to regulate the practice of refraction, spectacle dispensing and Contact Lens fitting, etc.;

(b) if so, the details thereof; and

(c) if not, what are the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) to (c) There is no proposal under consideration of Government *to* legislate on the area of refraction, spectacle dispensing and contact lens fitting. Health is a State subject and it is for each State to regulate the practice as considered necessary as well as provide health education to the public.

Increasing Cases of Poliomyelitis

1418. DR. SANJAYA SINH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that the number of cases of Poliomyelitis has gone up sharply this year;

(b) if so, the details thereof; and

(c) what corrective steps Government have taken in this regard ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) to (c) There has been a marginal increase in the incidence of poliomyelitis in the current calender year 1992 as compared to 1991. This is partly due to the cyclical peak attained by the disease in the current year and partly due to improved surveillance.

Apart from sustaining and intensifying the routine immunization services, States have undertaken mop up operations for increasing the coverage levels and are also undertaking containment measures in the pockets of high incidence.

Aids Infection

1419. DR. SANJAYA SINH :

SHRI SHIV PRATAP MISHRA :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) the number of men and women, who have been found to be infected by HIV in this country during the last 3 years and till date;

(b) what is the present somber of people { infected with AIDS virus tn each State; and

(c) the steps Government have taken/ propose to take to check the spread of AIDS in this country ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) and (b) 10,856 men and women were HIV positive in the country upto 31-10-92. State/UT Wise distribution of these HIV seropositives is given in the statement attached *(See* below).

(c) The Government of India has launched a Centrally sponsored scheme, with World Bank and WHO assistance, for the prevention and control of AIDS in the country. The accent is on prevention as AIDS has no cure; as of now. The programme components consist of strengthen. ing management, increasing the level ot awareness in community and among individuals, increasing safety of blood and blood products, augmenting STD control-programme and improving clinical management and surveillance.

Statement

SERO Surveillance for WV Infection Reported in the Country
(period upto: 31/10/92) PROVISIONAL

Name of the State	Cases Screened	Western Blot Positive Cases
Andhra Pradesh	29,690	96
Assam	6,498	4
Bihar	5,749	0
Chandigarh	40,998	119
Delbi	2,04,816	665
Goa	39,953	178
Gujarat	1,10,620	237
Haryana	59,736	30
Himachal Pradesh	9,164	6
Jammu & Kashmir	1,202	3
Karnataka	1,46,933	203
Kerala	24,807	73
Madhya Pradesh	33,827	42
Maharashtra	1,55,445	4,616
Manipur	10,599	1,688
Mizoram	1,000	12
Nagaland	699	78
Orissa	11,335	0
Pondicherry	29,368	401
Rajasthan	14,503	14
Tamil Nadu	4,81,190	2,102
Uttar Pradesh	38,076	237
West Bengal	72,359	52
TOTAL	15, 28,567	10,856